

## **MEMORANDUM**

TO: All Physicians and Group Practices, Nurse Practitioners, Physician Assistants, Hospital Infection Control Nurses, Hospital Laboratory Directors, Head Nurses of Emergency Rooms, Hospital CEOs/Administrators, Long-Term Care Facilities, Student Health Services, Radford University Clinics, and Edward Via Virginia College of Osteopathic Medicine

FROM: J. Henry Hershey, M.D., M.P.H., Director

DATE: October 13, 2004

SUBJECT: **Centers for Disease Control and Prevention (CDC) Allocation Plan to Address Influenza Vaccine Shortages**

As you know, the Centers for Disease Control and Prevention (CDC) and Aventis Pasteur announced yesterday the first phase of a plan to allocate influenza (flu) vaccine. This was in response to the recently announced loss of half of the nation's expected flu vaccine supply for the 2004-2005 season. The plan calls for CDC to work closely with Aventis to distribute, in phases, 22.4 million doses of unshipped vaccine to identified areas of need throughout the country. I want to be sure you are aware of this information – BUT – I also need to caution that it is preliminary and that modifications may occur. Again, as I learn more, I will share that information with you.

My current understanding is that, beginning immediately, about 14.2 million doses of vaccine will be allocated over the next 6-8 weeks through Aventis Pasteur contracts directly to high-priority vaccine providers, including hospitals, long-term care facilities, nursing homes, approximately 2,100 pediatric providers, the Veterans Administration, the Department of Defense, and state and local health departments, among others. With the exception of targeted military personnel, for each of these groups the number of doses of vaccine supplied will be predicated upon projections of vaccine needed to meet only those high-risk populations defined this year to receive vaccine.

CDC will continue to work with Aventis Pasteur and state and local health departments to identify people, by region, on the vaccination priority list. Other efforts, including possible county-by-county mapping of vaccine distribution and high-risk populations, will be undertaken--by CDC and state and local health departments--to identify where remaining needs continue to exist. All of that information will be factored into decisions about the release and shipping of the remaining approximately 8.2 million doses later this fall. Also, CDC will receive about 2.5 million doses of Aventis Pasteur vaccine for its stockpile. When those doses are received later this year, they will be used in priority areas that are missing vaccine for priority populations.

In this initial allocation, it is CDC's plan to assure that the Virginia Department of Health receives at least 50% of our original Chiron order of adult flu vaccine. Once these approximate 55,000 doses of adult flu vaccine are received at the Virginia Department of Health in Richmond, they will then be distributed to local health departments based on population. So, at some point in the next 6 – 8 weeks, the New River Health District (NRHD) will receive a limited supply of adult flu vaccine. Also, the NRHD should receive a limited supply of flu vaccine for children. **At the present time, none of our local health departments have influenza vaccine.** When we do receive vaccine, our immediate focus will be on making sure that our vaccine supply reaches those high-risk groups as defined by CDC who are most at-risk of experiencing serious complications from the flu:

- all children aged 6-23 months,
- adults aged 65 years and older,
- persons aged 2-64 years with underlying chronic medical conditions,
- all women who will be pregnant during influenza season,
- residents of nursing homes and long-term care facilities,
- children 6 months-18 years of age on chronic aspirin therapy,
- health-care workers with direct patient care, and
- out-of-home caregivers and household contacts of children aged <6 months.

In the interim, I suggest that those New River Valley residents in the above noted high-risk population contact their local primary care providers, hospitals, pharmacies, or other providers to inquire about flu shot availability. I am also reminding everyone that vaccination--although the best protection against flu--is **not** the only way to help protect yourself against flu. Everyone can take practical steps, should practice good health habits, and follow primary prevention strategies to help prevent the spread of flu such as:

- Using a tissue to cover your nose and mouth when coughing or sneezing; disposing of the tissue immediately and washing hands thoroughly.
- Avoiding touching your eyes, nose, and mouth which can help spread germs.
- Frequently washing hands with soap and hot water for at least 20 seconds.
- Rinsing and drying hands with a disposable towel. Using the towel to turn off the faucet.
- Avoiding close contact with people who are sick or keeping your distance from others if you are sick.
- Staying home from work, school, and errands if you are sick.
- Refraining from visiting a nursing home if you are sick.

Additionally, influenza antiviral medications are another tool that can be used to prevent flu and, for those ill with the flu, to reduce the number of days of illness. Flu season typically peaks in the United States between December and March. Because each season is unpredictable, it is not known how severe the 2004-2005 season might be.

Again, I want to reemphasize that we need the help of the public, public health community, and medical community to make sure the available flu vaccine goes to those who truly need it most. We need people who are not in the priority groups to forgo or defer flu vaccination so it can be given to someone more vulnerable to complications from the flu. We have faced vaccine shortages in the past and have worked through them successfully. Once again, we need to come together to work through this challenge.

For more information about the flu and this year's recommendations, visit the New River Health District's web site at [www.vdh.virginia.gov/lhd/newriver/nrnews.htm](http://www.vdh.virginia.gov/lhd/newriver/nrnews.htm) or the CDC web site at <http://www.cdc.gov/flu>.

If you have any questions about this information, please contact Katherine McCombs, MPH, District Epidemiologist, or me at (540) 381-7100, Ext. 189 or 156, respectively.